

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A partificate of mailings can only be used for demostic mailings of the

CURRENT CORRESPONDE 20999	NCE ADDRESS (Note: Use Block 1 fo 7590 01/26/2006	or any change of address)	010	m	Note: A certificate of Fec(s) Transmittal. T papers. Each addition have its own certification.	of mailing can of his certificate of nal paper, such te of mailing or	only be used for annot be used as an assignment transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must	
CU	STOMER N	UMBER	PR 26 2006	IAP34	I hereby certify that States Postal Service addressed to the Ma transmitted to the US	ertificate of Ma this Fec(s) Tran with sufficient ail Stop ISSUE PTO (571) 273	ailing or Trans smittal is bein postage for fir FEE address -2885, on the c	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
	2285 0	7790	BMARKOFF!	(c)				(Depositor's name)	
	22000		TO THE OWNER OF THE OWNER					(Signature)	
			-	,				(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO. CONFIRMATION NO.			
10/006,294	12/06/2001	Jason Charle			ly	-45 0110-03712-		2668	
TITLE OF INVENTION: EMBEDDING DATA IN MATERIAL						282430US8X			
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE		TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$1400)	\$300		\$1700		04/26/2006	
EXAMINER		ART UNIT		CI	LASS-SUBCLASS				
BHATNAC	2623	2623 38							
1. Change of corresponder CFR 1.363). Change of corresponders form PTO/SB.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) MCCLELLAND, MAIER								
"Fee Address" indi PTO/SB/47; Rev 03-02 Number is required.	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
3. ASSIGNEE NAME AN	ND RESIDENCE DATA TO	BE PRINTED ON T	HE PATEN	Γ (print o	or type)				
PLEASE NOTE: Unle recordation as set forth	ess an assignee is identified to in 37 CFR 3.11. Completion	oclow, no assignee of this form is NO	data will app Γa substitute	ear on t for filin	he patent. If an assig g an assignment.	gnee is identifie	ed below, the d	locument has been filed for	
(A) NAME OF ASSIG	B) RESIDENCE: (CITY and STATE OR COUNTRY)								
SONY UNITED KINGDOM LIMITED				Weybridge, ENGEAND					
Please check the appropria	ate assignee category or categ	ories (will not be pri	inted on the p	atent):	☐ Individual □ 23 (Corporation or o	other private gr	oup entity Government	
4a. The following fee(s) a	. Payment of	Payment of Fee(s):							
Issuc Fee	A check in the amount of the fee(s) is enclosed.								
Publication Fee (No	Payment by credit card. Form PTO-2038 is attached.								
Advance Order - #	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15-0030 (enclose an extra copy of this form).								
5. Change in Entity State	us (from status indicated abov		-						
	SMALL ENTITY status. See				o longer claiming SMA				
The Director of the USPT NOTE: The Issue Fee and interest as shown by the re	O is requested to apply the Iss Publication Fee (if required) cords of the United States Pa	sue Fee and Publicat will not be accepted tent and Trademark	tion Fee (if ar I from anyone Office.	ny) or to e other t	re-apply any previou han the applicant; a re	sly paid issue for gistered attorne	ee to the applica y or agent; or the	ation identified above. he assignce or other party in	
Authorized Signature _	Date 84/27/2886 STUDIES 622006								
Typed or printed name	Joseph Scafetta	Registristantes Reg. No. 26.803							

Typed or printed name Registration No. 26,803

A3 EC 1503

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USE/FORES) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USE/FORES of the following upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.